

Centers for Disease Control and Prevention (CDC)  
Atlanta, GA 30333**SPECIMEN SUBMISSION FORM FOR POTENTIAL CASES OF SARS****PATIENT IDENTIFICATION INFORMATION****MANDATORY: CDC SARS NUMBER** \_\_\_\_\_

(Provided through State Health Department)

Patient Name \_\_\_\_\_ State Health Department Number \_\_\_\_\_

Patient Date of Birth and Age: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY) \_\_\_\_ years Gender: Male Female

Patient's Residence: \_\_\_\_\_ (Town/Province/State/County)

Date of Onset: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

**SPECIMENS FOR THIS PATIENT BEING SENT IN THIS SHIPMENT****I. UPPER RESPIRATORY TRACT**☐ A. Nasopharyngeal wash/aspirate

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

☐ B. Nasopharyngeal/oropharyngeal swabs

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

**II. LOWER RESPIRATORY TRACT**☐ Bronchoalveolar lavage (BAL), tracheal aspirate, or pleural tap

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

**III. BLOOD COMPONENTS****A. Serum**☐ 1. Acute

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

☐ 2. Convalescent (Min. 22 days after onset of fever)

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

**B. Whole Blood**☐ 1. Acute

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

☐ 2. Convalescent (Min. 22 days after onset of fever)

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

**IV. TISSUE (from deceased patients only)**☐ A. Fixed Tissue

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

☐ B. Frozen Tissue

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

**VI. STOOL**☐ 10 – 50 ml of stool in a tightly sealed stool cup or urine container

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

**VII. ADDITIONAL SPECIMENS (Please describe)**

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

Date of Collection: \_\_\_\_/\_\_\_\_/\_\_\_\_ (MM/DD/YY)

**DOMESTIC SPECIMENS:** Please contact your state epidemiologist for consultation to determine whether patients meet the SARS case definition before collecting and shipping specimens for SARS testing. For contact information go to [http://www.cste.org/members/state\\_and\\_territorial\\_epi.asp](http://www.cste.org/members/state_and_territorial_epi.asp) CDC will not accept unsolicited specimens. Please contact your State Health Laboratory for submission instructions [http://www.phl.org/public\\_health\\_labs/index.cfm](http://www.phl.org/public_health_labs/index.cfm).

**INTERNATIONAL SPECIMENS:** see instructions given in [www.cdc.gov/ncidod/sars/intspecimens-sars.htm](http://www.cdc.gov/ncidod/sars/intspecimens-sars.htm)

Label all packages: **“Diagnostic Specimens. UN 3373. Packed in compliance with IATA packing instructions 650”**. Follow packaging guidelines given in “Packing Diagnostic Specimens for Transport: Summary Instructions” ([www.cdc.gov/ncidod/sars/packingspecimens-sars.htm](http://www.cdc.gov/ncidod/sars/packingspecimens-sars.htm)). Use specimen collection instructions given in “Guidelines for Collection of Specimens from Potential Cases of SARS” ([www.cdc.gov/ncidod/sars/specimen\\_collection\\_sars2.htm](http://www.cdc.gov/ncidod/sars/specimen_collection_sars2.htm).)